



DEMOCRATIC POLICY COMMITTEE **FACT SHEET**

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Protecting the Doctor/Patient Relationship: Doctor/Patient Communications

S. 6 prohibits managed care plans from restricting doctor-patient communications. Consumers have legitimate fears that medical decisions in many managed care plans are made by company bureaucrats rather than their own doctors. In some cases, the health plan administrators prohibit doctors from giving a patient information because it might lead to the patient requesting care that would cost the health plan too much money. The Democratic *Patients' Bill of Rights* prohibits plans from restricting provider communication with patients. This would allow doctors to do their job—giving patients all the information and advice they need to make critical decisions about their health care.

- Currently, plans can tell a doctor not to discuss some of the therapies that could help a patient—for example, the most expensive ones. When this happens, patients can go without getting the care they need—without even knowing about another therapy that could help them.
- Plans can also keep the physician from discussing the HMO's financial incentives. When this happens, doctors' recommendations may be biased by those incentives, while patients think that they are getting an objective opinion about the best care.
- Other plans include contract provisions stating that doctors cannot say anything critical about the plan, or they make it impossible for a doctor to talk about an HMO's utilization review techniques. When this happens, doctors can't warn patients about problems they may face, or tell patients when the plan has denied necessary care.
- The President's Advisory Commission on Consumer Protection and Quality in the Health Care Industry recommended a prohibition on gag rules. This recommendation already has been implemented for Medicare beneficiaries and Federal workers. All Americans deserve the same protection.
- Our opponents will argue that the Republican bill includes a prohibition on gag clauses. But their provision applies only when an insurance company or HMO prohibits the provider from giving medical advice. It does not ban the HMO from restricting advice in any other way—and we know from experience that there are many other restrictions that plans can make.

